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** CONTINUING DA	inson, Mesa, AZ; ATA **********************************		ENTITY **				
met Allowance Allowance COUNTRY AZ Acknowledged Examiner's Signature Initials				TOTAL CLAIMS 26		INDEPENDENT CLAIMS 1	
ADDRESS SQUIRE, SANDER: Two Renaissance S Suite 2700 40 North Central Av Phoenix, AZ85004-	enue						
TITLE Device for use in sti	mulating bone growth				•		
FILING FEE FE RECEIVED No 504 No	S: Authority has been given in Paper to charge/credit DEPOSIT ACCOUNT for following:			All Fees 1.16 Fees (Filing) 1.17 Fees (Processing Ext. of time) 1.18 Fees (Issue) Other Credit			